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TO	Ex. Jim McClellan	03/24/04
	NAME	DATE
	USPTO	703-746-3516
	COMPANY/FIRM	FAX #
	NUMBER OF PAGES INCLUDING COVER: 2	CONFIRM FAX: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
FROM	Chien Yuan	236083US6PCT
	NAME	OUR REFERENCE
	703-412-3536	09/701,288
	DIRECT PHONE #	YOUR REFERENCE

MESSAGE**PLEASE DELIVER IMMEDIATELY TO EX. Jim McClellan.**

Thank you for the opportunity to discuss this application in-person with you again. Please find attached an Applicant Initiated Interview Request Form and proposed claim amendments. I look forward to discussing the case with you tomorrow at 2 p.m. Thanks again.

Unless otherwise indicated or obvious from the nature of the transmittal, the information contained in this facsimile message is attorney privileged and confidential information intended for the use of the individual or entity named above. If the reader of this message is not the intended recipient or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error or are not sure whether it is privileged, please immediately notify us by telephone and return the original message to us at the above address via the U.S. Postal Service at our Expense. Thank You.

PTOL-413A (05-03)
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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Applicant Initiated Interview Request Form

Application No.: 09/701,288 First Named Applicant: Ritter
Examiner: J. McClellan Art Unit: 3627 Status of Application: Pending

Tentative Participants:

(1) Exmr. J. McClellan (2) Chris Yuan, Reg. No. 48,056
(3) _____ (4) _____

Proposed Date of Interview: 3/24/04 Proposed Time: 2:00 (AM/PM) PM

Type of Interview Requested:

(1) ☐ Telephonic (2) ☒ Personal (3) ☐ Video Conference

Exhibit To Be Shown or Demonstrated: ☐ YES ☒ NO

If yes, provide brief description: _____

Issues To Be Discussed

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>Rej</u>	<u>1,6,11, and 15</u>	<u>WO 2003/021441</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Continuation Sheet Attached

Brief Description of Arguments to be Presented:

Cited art does not teach or suggest each and every feature of proposedly amended
claims 1,6,11, and 15, which are herewith attached.

An interview was conducted on the above-identified application on _____.

NOTE:

This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP § 713.01).

This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

(Applicant/Applicant's Representative Signature)

(Examiner/SPE Signature)

This collection of information is required by 37 CFR 1.133. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.